Approved for use through 1/31/2007. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							ŕ	Application or Docket Number 10/584,388			ing Date 22/2006	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)								SMALL	ENTITY 🛛	OTHER THAN OR SMALL ENTITY			
_	FOR		NUMBER FILED		NUMBER EXTRA		Г	RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
BASIC FEE (37 CFR 1 16(a), (b), or (c))			N/A	N/A		N/A		N/A		1	N/A		
SEARCH FEE (37 CFR 1 16(k), (i), or (m))			N/A		N/A		1	N/A		1	N/A		
EXAMINATION FEE (37 CFR 1,16(o), (p), or (q))			N/A		N/A]	N/A]	N/A		
	TAL CLAIMS CFR 1.16(i))		minus 20 = *				1	x s =		OR	x s =		
IND	EPENDENT CLAIM CFR 1.16(h))	1S	minus 3 = *				1	X \$ =		1	X S =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE she is \$ add	If the specification and drawings exc sheets of paper, the application size is \$250 (\$125 for small entity) for eac additional 50 sheets or fraction there 35 U.S.C. 41(a)(1)(G) and 37 CFR 1			e fee due ach reof. See							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))							1			1			
* If the difference in column 1 is less than zero, enter "0" in column 2.							•	TOTAL		1	TOTAL		
APPLICATION AS AMENDED - PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY													
AMENDMENT	12/06/2010	AMENDMEN'		HIGHEST NUMBER PREVIOUS PAID FOR	SLY	PRESENT		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.160))	· 8	Minus	27	-	0	1	X \$26 =	0	OR	X \$ =		
	Independent (37 CFR 1.16(h))	• 2	Minus	···10	-	0	1	X \$110 =	0	OR	xs =		
	Application Size Fee (37 CFR 1.16(s))									Г			
۸	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))						1			OR			
								TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOUS PAID FO	R F	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,16())		Minus		-		1	X \$ =		OR	X \$ =		
N	Independent (37 CFR 1 16(h))		Minus	***	-		1	X \$ =		OR	x s =		
Z	Application Size Fee (37 CFR 1.16(s))]			1			
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))						1			OR			
										OR	TOTAL ADD'L FEE		
** If	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. Legal Instrument Examiner: "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. The Selection Collegation is sometically 25 (ZESI 1.6 This professation is sometical to be also begin be the back in to file and the the ISETO to												

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to life (and by the DSFTO to process) an application. Confidentiality is governed by 35 US. of .22 and 37 CFR 1.14. This collection is estimated to bette 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete the form and/or suggestions for reducing this burden, should be sent to the Chief information Cliber. U.S. Patient and Trademark Office, U.S. Department of Commono. P.O. Box 1469, Alexandria, V. 2231-0. Dox 1459, 1469, DO NOT SEND FEES OR COMPLETED FORMS TO THIS AUDIESS. SEND TO TO Commissioner for Patients, P.O. Box 1459, 1469, 1